

~~Security Information~~

REQUEST FOR HEADQUARTERS AUTHORIZATION
OF TRAVEL TO THE UNITED STATES

It is requested that authorization for my travel be granted based upon the following information:

1. Name, Grade, Title: _____
2. Station: _____
3. ETD: _____ ETA: _____ VIA ☐ AIR and/or ☐ SURFACE.
4. Purpose(s): ☐ PCS ☐ TDY ☐ HOME LEAVE ☐ ANNUAL LEAVE.
5. Sequence and Approximate Days Involved Each Status: _____
6. Name, Age, Relationship of Dependents to Accompany: _____
7. Shipment of: ☐ Personal Automobile
☐ Unaccompanied Baggage to: _____
☐ Household Effects to: _____
8. If HOME LEAVE, Indicate Legal Residence (As set forth in "Residence and Dependency Report"):
(1) Overseas PCS Arrival Date: _____
(2) Accumulated Annual Leave Approximately _____ Days.
9. If TDY, State Purpose: _____

Signature of Traveler

Recommend Headquarters Approval:

Signed for Chief of Mission

*****HEADQUARTERS USE ONLY*****

Approved:

Special Provisions:

1. Travel Order # _____, Allotment Account # _____.
2. Training period _____ to _____.
3. Other: _____

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